# FORM D



UNITED STATES / O / O SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL

FORM D

NOTICE OF SALE OF SECURITIES 1 8 2004 PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR 155 UNIFORM LIMITED OFFERING EXEMPTION

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Name of Offering ( check if this is an amendment and name has changed, and indicate change.)								
Private placement of up to \$300 million in limited liability company interests								
Filing Under (Check box(es) that appl	y): □ Rule 504 □ Rule 505	■ Rule 506	☐ Section 4(6)	□ ULOE				
Type of Filing: ☐ New Filing	g 🗷 Amendment							
	A. BASIC IDENTIFI	CATION DATA						
1. Enter the information requested a	bout the issuer							
Name of Issuer ( check if this is an a	mendment and name has changed, and	indicate change.)	. <u></u>					
MONY/Transwestern Mezzanine Re	ealty Partners II, L.L.C.							
Address of Executive Offices	(Number and Street, City, Stat	e, Zip Code)	Telephone Number	er (Including Area Code)				
Address of Principal Business Operati	ons (Number and Street, City, Stat	e, Zip Code)	Telephone Number	er (Including Area Code)				
(if different from Executive Offices)								
Brief Description of Business:								
				PROCESSED				
Type of Business Organization				7.000				
corporation	☐ limited partnership, already	formed	🗆 other (	please specific 22 2004				
☐ business trust	☐ limited partnership, to be for	ormed		JOI4 & & 2001				
	Mont	h Year		THOMSON				
Actual or Estimated Date of Incorporation or Organization:								
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:								
	CN for Canada; FN for other i	foreign jurisdiction	)					

### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: ☐ Promoter ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: ☐ Promoter ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or Check Box(es) that Apply: ☐ Promoter ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or Check Box(es) that Apply: ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

31,500					B. INF	ORMAŤI	ION ABO	UT OFFE	RING						
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes . $\square$	No					
2.	2. What is the minimum investment that will be accepted from any individual?								. \$						
3.										Yes . □	No				
Л										anv					
	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.														
Ful	Full Name (Last name first, if individual)														
Bus	siness o	or Residen	ice Addres	s (Number	and Street,	, City, State	e, Zip Code	e)		ACC 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
Nar	me of A	ssociated	Broker or	Dealer											
Sta	tes in V	Vhich Per	son Listed	Has Solicit	ed or Inter	nds to Solid	cit Purchase	ers							
	(Chec	k "All Sta	ites" or ch	eck individu	ıal States)		•••••					□ All S	.□ All States		
[A] [I] [M' [R]	L] T]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Ful	l Name	(Last nar	ne first, if	individual)											
Bus	siness c	or Residen	ice Addres	s (Number	and Street,	, City, State	e, Zip Code	e)							
Naı	me of A	Associated	Broker or	Dealer											
Sta	tes in V	Vhich Per	son Listed	Has Solicit	ed or Inter	nds to Solid	cit Purchase	ers							
	(Chec	k "All Sta	ites" or ch	eck individu	ial States)		•••••				••••••	□ All S	tates		
[A] [I] [M]	L] T]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Name (Last name first, if individual)															
Business or Residence Address (Number and Street, City, State, Zip Code)															
Name of Associated Broker or Dealer															
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers															
(Check "All States" or check individual States)								tates							
[A: [I: [M' [R:	L] T]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Enter the aggregate offering price of securities included in this offering and the total amount already

					4.4.11
	Type of Security		Aggregate fering Price	Aı	nount Already Sold
	Debt	\$	0	\$	0
	Equity			s	0
	□ Common □ Preferred	<b>~</b>		Ψ	
	Convertible Securities (including warrants)	\$	0	\$	0
	Partnership Interests			\$	0
	Other (Specify <u>limited liability company interests</u> )			\$ 19	97,851,000
	Total				7,851,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
	Allower also in Appendix, Column 3, it minig under CDOD.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
		]	Number Investors		Aggregate collar Amount of Purchases
	Accredited Investors			\$ <u>19</u>	97,851,000
	Non-accredited Investors			-	0
	Total (for filings under Rule 504 only)		N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1.				
	Type of offering		Type of Security	D	ollar Amount Sold
	Rule 505			\$	
	Regulation A			\$	
	Rule 504			\$_	
	Total			\$_	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs		<b>x</b>	\$ <u>75</u>	,000
	Legal Fees		<b>x</b>	\$ <u>30</u>	0,000
	Accounting Fees	•••••	<b>x</b>	\$ <u>50</u>	,000
	Engineering Fees		🗆	\$	
	Sales Commissions (specify finders' fees separately)	• • • • • • • • • • • • • • • • • • • •		\$	
	Other Expenses (identify)(travel)	•••••	<b>x</b>	\$ <u>25</u>	,000
	Total	•••••	<b>x</b>	\$ <u>45</u>	0,000

	total expenses furnished in response to Part	offering price given in response to Part C-Question 1 C-Question 4.a. This difference is the "adjusted gros	S	\$ <u>2</u> 5	99,5:	50,000
5.	the purposes shown. If the amount for any pu	ess proceeds to the issuer used or proposed to be use prose is not known, furnish an estimate and check the ts listed must equal the adjusted gross proceeds to the	ne bo	x to the		
	·			Payments to Officers, Director & Affiliates	rs	Payments to Others
	Salaries and fees		<b>×</b>	\$_15,000,000		\$
	Purchase of real estate		🗆	\$		\$
	Purchasing, rental or leasing and installat	ion of machinery and equipment	🗆	\$		\$
		and facilities				
	Acquisition of other businesses (includin offering that may be used in exchange for issuer pursuant to a merger)		🗆	\$		\$
				4		
				\$	. 🗆	\$
	Column Totals		<b>x</b>	\$_15,000,000		\$ <u>284,550,000</u>
	Total Payments Listed (column totals add	ed)		<b>E</b> \$ 29	9,55	0,000
		D. FEDERAL SIGNATURE	7	A Committee of the Comm		
The	e issuer has duly caused this notice to be signed nature constitutes an undertaking by the issuer to	by the undersigned duly authorized person. If this not by furnish to the U.S. Securities and Exchange Commit edited investor pursuant to paragraph (b)(2) of Rule 5	tice i	s filed under Rule	505	, the following
M( Pai	ner (Print or Type)  ONY/Transwestern Mezzanine Realty  rtners II, L.L.C.	Signature		Date June 16, 2004		
Nai	me of Signer (Print or Type) uglas W. Lyons	Title of Signer (Print or Type)  Managing Director				

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)